





PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) MERCK-1942														
	In re Application of Herwig BUCHHOLZ et al.															
	Application Number 09/807,401	Filed April 13, 2001														
	NATURAL FORMULATION FOR THE TREATMENT AND PREVENTION OF DEPRESSION, CONTAINING ST JOHN'S WORT For DERIVATIVES OF DIHYDRO- AND TETRAHYDROFOLIC ACID															
	Group Art Unit 1615	Examiner Charesse L. EVANS														
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a response in the above identified application.</p> <p>The requested extension and appropriate non-small-entity fee are as follows (check time period desired):</p> <table><tbody><tr><td><input type="checkbox"/> One month (37 CFR 1.17(a)(1))</td><td>\$ _____</td></tr><tr><td><input type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td><td>\$ _____</td></tr><tr><td><input type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td><td>\$ _____</td></tr><tr><td><input checked="" type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td><td>\$ <u>1,070</u></td></tr><tr><td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td><td>\$ _____</td></tr></tbody></table> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____.</p> <p><input checked="" type="checkbox"/> A check in the amount of \$1,070.00 is enclosed for the 4th month extension of time - minus the \$410.00 fee paid for a two month extension of time (\$110.00 was paid on July 3, 2003 and \$300.00 was paid on August 4, 2003)..</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required or credit any overpayment, to Deposit Account Number <u>13-3402</u>.</p> <p>I have enclosed a duplicate copy of this sheet.</p> <p>I am the <input type="checkbox"/> applicant/inventor.</p> <p><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71</p> <p>Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).</p> <p><input checked="" type="checkbox"/> attorney or agent of record.</p> <p><input type="checkbox"/> attorney or agent under 37 CFR 1.34(a).</p> <p>Registration number if acting under 37 CFR 1.34(a). _____.</p> <p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> <table><tbody><tr><td>October 3, 2003 Date</td><td> Signature</td></tr><tr><td></td><td>Nicole E. Kinsey, Reg. No. 50,723 Typed or printed name</td></tr></tbody></table> <p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.</p> <p><input type="checkbox"/> *Total of _____ forms are submitted.</p>			<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$ _____	<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$ _____	<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$ _____	<input checked="" type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$ <u>1,070</u>	<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$ _____	October 3, 2003 Date	 Signature		Nicole E. Kinsey, Reg. No. 50,723 Typed or printed name
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$ _____															
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<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$ _____															
<input checked="" type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$ <u>1,070</u>															
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$ _____															
October 3, 2003 Date	 Signature															
	Nicole E. Kinsey, Reg. No. 50,723 Typed or printed name															

Burden Hour Statement: This form is estimated to take 0.1 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner of Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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